FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

DESCRIPTION OF THE PARTY	-		
5.00		2.	1.0
		17	
200			7 T X - 14
	366		
- Land		7	7.1
V. It waster	The second second	Company of	11/21/16

FORM

D	SCLOSURE SUMMARY	PAGE		DR-2	DISCLOSURE
COMMITTEE N	AME(Must be same as on Statement of Or	ganization)	ETHICS AND	(Rev. 12/2005)	REPORT
MPORTANT: In 1)Statewide/Le 4)County Centre Political Subdivision PAC CANDIDATE CO Candidate Name Office Sought	adicate by # type of committee you are reported is a committee (5) County Candidate (6) City PAC (11) Local Ballot Issue DMMITTEES ONLY: Subject to possible civil and criminal penalties	political Par District (if S	3)State Party ol Board or Other or Other Political ty (if applicable) enate or House)	For Office Use O Comm. # Logged In Scanned Computer	d Campaign rd . 1A wa 50319
e candidate for dividua (res pons	a candidate's committee, and the chairpers sible for filips timely and accurate reports.	on, for any other type	of committee, is the		
×ain	Bokack	フタ	-930-3620	l	
GNATURE OF	ERSON FILING REPORT		LEPHONE	DATE S	IGNED
	12-19-09			·	
	final (termination) report and attach Notice oust continue to file reports until a DR-3 is file		Cou	nty & Local Committee h Election is held	es, enter County in
	STATE	MENT OF CASH	ON HAND		7772
committe	at the beginning of the reporting period. (To ee. This amount MUST be the same as the ast reporting period or must be zero if this is	cash on hand at the e	the end		7000
ADD TO	OTAL MONEY TAKEN IN THIS PERIOD			5	11760
Schedul	le A: Cash Contributions total (Attach Sche	dule A) (*also see in-l	kind below)	<u>- 1</u>	267,68
Schedul	le F: Loans Received total (Attach Schedule	F)			
Schedul	le H: Total Sales of Campaign Property (Atta	ach Schedule H)			
	(Schedule H applies to Candidates' Co				
		•	SUB-TOTAL	s <u>/</u> ~	42.74
	ACT TOTAL MONEY SPENT THIS PERIOD				
	le B: Expenditures total (Attach Schedule B	,	,		
	le F: Loan Repayments total (Attach Schedi				
	at the end of this reporting period (if final rep) (Attach DR-3)			s <u>42</u>	44,42
UNPAID BILLS ((From Schedule D - Attach Schedule D)			\$	
N KIND CONTRE	BUTIONS (From Schedule E - Attach Schedu	ıle E)		\$	
OUTSTANDING	LOANS (From Schedule F - Attach Schedul	e F)		\$	
ONSULTANT BR	REAKDOWN (Schedule G Attached?)			YES	NO
ANDIDATE COM	AMITTEES ONLY:				
ALUE OF CAMP	AIGN PROPERTY (From Schedule H - Attac	ch Schedule H)		\$	
TATE COMMITT	EES: Submit a reconciled campaign accou	nt bank statement in J	lanuary of each year.		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

CHECK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED	(if applicable)	3.000	TO CANDIDATE*	RECEIVED	FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
10/20	ID#	MARK DONKERSTOR !			
•	CK# 4821	304 Franklost		\$ 60/00	
2008	1	SANDOMN, IA 57248	3	50/20	
10,500	ID#	Killy-MARY OBRIEN			
2008	CK# CASh	GANGORN. TA 51248		10000	L
1/28	ID#	SANDORN EAUINGS BANK			
•	CK#	1 Tap MAINST		.66	
	ID#	SANbour, IA 5/24D		,00	
12/3-08		5520 410 ST			
	CK#CASA	Pringhae IASIZYS		100.00	
7308	ID#	LARRY BOSALT ST			
100	CK#CASh			\$ 000	
<u>ر د د د د د د د د د د د د د د د د د د د</u>		SAUDOZI, IA 57248		3000	
173.208		VI AMINI DE WEAVEL		146.0-	
	ск# 7767	Sulherland, IA 51058		10000	L
12.3/	ID#	SilliAN Brown st			
320 g	CK##2350	602 VAIIEAU 31		5000	
	ID#	SAWboTA IA STOUP			
12.3		Vera Petrick			
2008	CK#CASA	SANBORN PASAYP		11600	L
12/2	ID#	Emily 60 44 VL 57			
308	CK#5/	6010 3204 SI		20000	
/	CK#5262_	Dr HARLAU VANDER BRIED		000	
12/3		1341 KANLAU VANder Gried			
2008	^{ck#} /734	She dun IASI201		25000	
300		O'le lawy person	SUB-TOTAL		
				\$	
		TOTAL (if last page of	of this schedule)	i i	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ____

For	Instructions.	800	Back	of Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

A

(Rev. 07/03)

CHECK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	
DRDITE OF A 115	
OBRIEN Courty Republicans	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	ANOUNT	1 / /5 505
RECEIVED	(if applicable)	THAT AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)	, COLIVED	RAISER
	NUMBER	4	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		INCOME
12/32008	ID#	DAUNY PAGGETT			1
· 10 apro		112ミフルタナ		\$	†
	CK#9960			100,00	
13/		JANHORN, TA 5/212		100,00	
143	ID#	DON McDOWELL A	1		
2008	CK# Jan J	DON McDOWEY 2861 Pierce St	1		
<i>1</i> 000	CK#/264	SANBORD, TASILYS		10000	
12/-	ID#	DAN STRUE			
123		5090 370 tt 57		1	
2008	CK# 3789			12,00	
	· · · · · · · · · · · · · · · · · · ·	PAU//NA - # 51046		14500	
<i>iH</i> 3	ID#	TOM GARNSWOITH			T
•	CK# acres	6574 480th ST			
7208	CK#8/4/	Archer, IA 51231		(00a)	L
15/	ID#	Kan Drailer			
[2/3		HON DrewHay			
2008	CK# 1339			100 5	
	1999	The don IA 5/201		100.00	1
P/3	ID#	GRACE HARTOG.			
10	CV# 40 C	201 7/04/2		1000	
2008	CK#3986	SANBORN JASAA		IWICE)	L
	ID#	GARY CARO (42) Ashart			
43	,			122	
	CK# 87201	504 CARROLLST		(ILLI)	
	010/	OHUBBUTA S/28			
2/2.	ID# ⁷	SAUbory SAVINGS	1 1		[
731	CIVII -	NO MAINET	Titerast		
2008	CK#	6'AUNICA, ZA, SUB	re eres!	42	L
2000	ID#	DITTUNUM/ FH IS WO		61	
13/		RICHARD HARKAUE			
1.5	CK#3986	211 WANGINK AUE		100.00	
	• ,	She don, IA SHOT		g could	
	ID#				
ĺ	OI4#				
	CK#				<u></u>
			0110 TOT:		
			SUB-TOTAL		

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ______ of ____

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

MONETARY
(Rev. 07/03) EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
OBK	IEN Cou	ENTY KEPUBLICANS	C	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11508	D# CK €7 /* 7	ROYA CHAMBERS 1001 7th St 54e don IA51201	CAMPAIGN docATE	5000
123-68	CK#CASA	TAYS RESTURANT 120 WEST THE ST 6ANGURN, DASING	BALA EXPENSE	120.20
18-08	ID# CK# 916	SAY RESTURBLY AT 120 West 14 ST & ANDOUG DASING	Bak Expose	569.2Y
7008	ю# • СК# 9 18	LowA Informative 227 N. St Sheldon, TA 57301	GALA Advertising	7350
	ID# CK#			
	ID#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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